Fill in th	his information to identi	fy your case:		
Debtor 1	Mary G. Romane	IIi		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	MIDDLE DISTRICT OF DIVISION	PENNSYLVANIA, WILKES-BARRE	
	19-bk-01174			
(if known)				☐ Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

Par	Summarize Your Assets		
		Your a	ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	17,955.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	17,955.00
Par	2: Summarize Your Liabilities		
		54566545666	iabilities It you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column AAmount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	16,125.13
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e @chedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j & chedule E/F	\$	89,301.16
	Your total liabilities	\$	105,426.29
Par	3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income(Official Form 106I) Copy your combined monthly income from line 12 & Chedule I	\$	3,093.31
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	* \$	4,581.85
Pari	4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your of	her schedu	ules.
7.	Yes What kind of debt do you have?		

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C§ 159.

page 1 of 2

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Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household

Debtor 1	Romanelli, Mary G.	Case number (if known)	19-bk-01174

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

 From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14. \$_____1,353.18

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on Schedule E/F, copy the following:	Total	alaim
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	64,808.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	64,808.00

		for any same and this filing			
SERBOARNER - ALSE VE	process of a Market Co. Market Electrical Process 和非 認定語	ify your case and this filing			
Debtor 1	Mary G. Romane First Name	Middle Name	Last Name		
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name		
(Opodse, ii ming)	, not realis		NNSYLVANIA, WILKES-BARRE		
United States B	ankruptcy Court for the:	DIVISION	WHO TEVALUE STATES		
Case number	19-bk-01174				Check if this is an amended filing
	orm 106A/B le A/B: Prop	nortv			12/15
In each autogony	congratoly list and describ	o items. List an asset only one	e. If an asset fits in more than one	category, list the asset in	the category where you
Alekale id dida bood	Be as complete and accurate space is needed, attach	ato se nocciblo. If two married i	people are filing together, both are on the top of any additional pages,	edually responsible for sur	Thising contect
Part 1: Describe	e Each Residence, Buildin	g, Land, or Other Real Estate Y	ou Own or Have an Interest In		
1. Do you own or	have any legal or equitab	le interest in any residence, bu	ilding, land, or similar property?		
No. Go to Pa	art 2.				
_	is the property?				
Decemb	e Your Vehicles				
			les, whether they are registered		
3. Cars, vans, t □ No ■ Yes	rucks, tractors, sport u	tility vehicles, motorcycles			
3.1 Make: Model:	Honda Civic	Who has an intere	st in the property? Check one	the amount of any secur	elaims or exemptions. Put ed claims on <i>Schedule D:</i> ims Secured by Property.
Year: Approxim	2015 ate mileage:	☐ Debtor 2 only ☐ Debtor 1 and De	·	Current value of the entire property?	Current value of the portion you own?
Other info	ormation:	At least one of the	ne debtors and another		
		Check if this is (see instructions)	community property	\$16,500.00	\$16,500.00
Examples: Bo ■ No □ Yes	eats, trailers, motors, pers	onal watercraft, fishing vessel	vehicles, other vehicles, and acts, snowmobiles, motorcycle acces	entries for pages	\$16,500.00

Official Form 106A/B

Schedule A/B: Property

D	ebtor 1	Romanelli, Mary G.	Case number (if known)	19-bk-01174
6.		old goods and furnishings es: Major appliances, furniture, linens, china, kitchenware		
7.	Flectron	Describe ics es: Televisions and radios; audio, video, stereo, and digital equipment; compu	iere printere scappers music collec	tions: electronic devices
	No No	including cell phones, cameras, media players, games Describe	iers, printers, scarners, music conce	tions, discitoria dovidos
8.	Collectil Example	oles of value es: Antiques and figurines; paintings, prints, or other artwork; books, pictures, collections, memorabilia, collectibles	or other art objects; stamp, coin, or l	paseball card collections; other
	■ No □ Yes.	Describe		
9.	Example No	ent for sports and hobbies es: Sports, photographic, exercise, and other hobby equipment; bicycles, pool instruments	tables, golf clubs, skis; canoes and	kayaks; carpentry tools; musical
4.0		Describe		
10	No No	oles: Pistols, rifles, shotguns, ammunition, and related equipment		
	☐ Yes.	Describe		
11	■ No	s bles: Everyday clothes, furs, leather coats, designer wear, shoes, accessories Describe		
12	■ No	y oles: Everyday jewelry, costume jewelry, engagement rings, wedding rings, he Describe	irloom jewelry, watches, gems, gold,	silver
13		rm animals oles: Dogs, cats, birds, horses		
		Describe		
14	No No	her personal and household items you did not already list, including a	ny health aids you did not list	
	☐ Yes.	Give specific information		
1	5. Add t Part	the dollar value of all of your entries from Part 3, including any entries 3. Write that number here	for pages you have attached for	\$0.00
	art 4: De	escribe Your Financial Assets	•	
69333	(1-25 p. 11) 25 p. 12	vn or have any legal or equitable interest in any of the following?		Current value of the portion you own? Do not deduct secured claims or exemptions.
16	6. Cash <i>Exam</i> j □ No	p <i>les:</i> Money you have in your wallet, in your home, in a safe deposit box, and o	on hand when you file your petition	
	Yes.		on hand	\$100.00
-				

Official Form 106A/B

Schedule A/B: Property

D	ebtor 1	Romaneili	, Mary G.	102958	Case number (if kn	nown) 19-bk-01174
17.	Exampl	s of money les: Checking, institution	savings, or s. If you ha	other financial accounts; c ve multiple accounts with	ertificates of deposit; shares in credit unions, brokerag the same institution, list each.	je houses, and other similar
	□ No ■ Yes				Institution name:	
	DA MARIEMENTO POR TANAN	333	17.1.	Checking Account	UFCW	\$100.00
			17.2.	Savings Account	Penn East	\$5.00
			17.3.	Checking Account	Peoples Security	\$250.00
18	. Bonds,	mutual funds les: Bond fund	s, or public ls, investme	y traded stocks nt accounts with brokerage	e firms, money market accounts	
	No Yes			Institution or issuer name	•	
19	. Non-pul joint ve ■ No		stock and i	nterests in incorporated	and unincorporated businesses, including an inte	erest in an LLC, partnership, and
		Give specific		about them me of entity:	% of ownership:	
20	Negotia Non-ne ■ No	able instrumen	ts include points are the information a	ersonal checks, cashiers' on the cashiers' on the cash of the cash	and non-negotiable instruments thecks, promissory notes, and money orders. someone by signing or delivering them.	
24	Dativam	nent or pension		uer name:		
21	Example ■ No	les: Interests i	n IRA, ERIS	SA, Keogh, 401(k), 403(b)	thrift savings accounts, or other pension or profit-sha	aring plans
	⊔ Yes. L	List each acco		of account:	Institution name:	
22	Your sh Example	y deposits an nare of all unus <i>les:</i> Agreemer	sed deposits	you have made so that yo	u may continue service or use from a company utilities (electric, gas, water), telecommunications comp	panies, or others
	■ No □ Yes				Institution name or individual:	
23	Annuitio	es (A contract	for a period	ic payment of money to yo	u, either for life or for a number of years)	
	☐ Yes		Issuer nam	ne and description.		
24	. Interests 26 U.S.C	s in an educa C. §§ 530(b)(1	tion IRA, i r), 529A(b), a	an account in a qualifie and 529(b)(1).	d ABLE program, or under a qualified state tuition	ı program.
	☐ Yes		Institution r	name and description. Sep	arately file the records of any interests.11 U.S.C. § 521	1(c):
25	■ No	equitable or Give specific			han anything listed in line 1), and rights or powers	s exercisable for your benefit
26	. Patents	s, copyrights,	trademark	s, trade secrets, and oth	er intellectual property n royalties and licensing agreements	
	No No	Give specific				
Of	ficial Form	n 106A/B		, Sc	hedule A/B: Property	page 3

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Official Form 106A/B

De	btor 1	Romanelli, Mary G.	Case number (if known)	19-bk-01174
	Ехатр	es, franchises, and other general intangibles les: Building permits, exclusive licenses, cooperative association holdi	ngs, liquor licenses, professional licenses	
	■ No □ Yes.	Give specific information about them		
Mo	oney or p	property owed to you?		Current value of the portion you own? Do not deduct secured claims or exemptions.
	■ No	unds owed to you Give specific information about them, including whether you already file	ed the returns and the tax years	
	<i>Examp</i> ■ No	support <i>sles:</i> Past due or lump sum alimony, spousal support, child support, r Give specific information	maintenance, divorce settlement, property set	tlement
	Other a Examp	amounts someone owes you oles: Unpaid wages, disability insurance payments, disability benefits, s unpaid loans you made to someone else	sick pay, vacation pay, workers' compensation	n, Social Security benefits;
31.	Interes Examp ■ No	Give specific information ts in insurance policies bles: Health, disability, or life insurance; health savings account (HSA); Name the insurance company of each policy and list its value. Company name:	; credit, homeowner's, or renter's insurance Beneficiary:	Surrender or refund value:
	If you a died.	terest in property that is due you from someone who has died are the beneficiary of a living trust, expect proceeds from a life insuran- Give specific information	ce policy, or are currently entitled to receive pro	
33.	<i>Exam</i> µ ■ No	against third parties, whether or not you have filed a lawsuit or oles: Accidents, employment disputes, insurance claims, or rights to Describe each claim	made a demand for payment sue	
	■ No	contingent and unliquidated claims of every nature, including co	ounterclaims of the debtor and rights to set	off claims
35.	■ No	nancial assets you did not already list Give specific information		
36	6. Add t Part 4	the dollar value of all of your entries from Part 4, including any e 4. Write that number here	entries for pages you have attached for	\$455.00
Pa	ır t.5 ; De	escribe Any Business-Related Property You Own or Have an Interest In. I	List any real estate in Part 1.	
	No. Go	own or have any legal or equitable interest in any business-related prop o to Part 6. Go to line 38.	erty?	

Official Form 106A/B

Schedule A/B: Property

Debt	or 1	Romanelli, Mary G.	-	Case number (if known)	19-bk-01174
Part	6; Des	scribe Any Farm- and Commercial Fishing-Related Property You Cou own or have an interest in farmland, list it in Part 1.	Own or Have an Interest	ln.	
I	No.	own or have any legal or equitable interest in any farm- on Go to Part 7. Go to line 47.	commercial fishing-	related property?	
Part	7:	Describe All Property You Own or Have an Interest in That You	Did Not List Above		
	Examp No Yes.	have other property of any kind you did not already list? bles: Season tickets, country club membership Give specific information he dollar value of all of your entries from Part 7. Write that	number here		\$0.00
Part	8:	List the Totals of Each Part of this Form			
55. 56. 57. 58. 59. 60.	Part 2 Part 3 Part 4 Part 5	1: Total real estate, line 2	\$16,500.00 \$0.00 \$455.00 \$0.00 \$0.00		*0.00
62.	Total	personal property. Add lines 56 through 61	\$16,955.00	Copy personal property to	stal \$16,955.00

page 5

\$16,955.00

63. Total of all property on Schedule A/B. Add line 55 + line 62

Fill in this information to identify your case:				
Debtor 1	Mary G. Romane	III		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	· · · · · ·
United States Ba	ankruptcy Court for the:	MIDDLE DISTRICT OF DIVISION	PENNSYLVANIA, WILKES-BARRE	
Case number	19-bk-01174			☐ Check if this
				amended filir

Official Form 106C

Part 1: Identify the Property You Claim as Exempt

Schedule C: The Property You Claim as Exempt

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

1.	Which set of exemptions are you claiming? ☐ You are claiming state and federal nonbankro					
	You are claiming federal exemptions. 11 U.s	S.C. § 522(b)(2)				
2.	For any property you list on Schedule A/B t	hat you claim as exem	ıpt, fi	ill in the information below.		
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption	
		Copy the value from Schedule A/B	Che	ck only one box for each exemption.		
	Honda	\$16,500.00			11 USC § 522(d)(2)	
	Civic 2015 Line from Schedule A/B: 3.1			100% of fair market value, up to any applicable statutory limit		
	on hand	\$100.00			11 USC § 522(d)(5)	
	Line from Schedule A/B: 16.1		100% of fair market value, up any applicable statutory limit			
	UFCW	\$100.00			11 USC § 522(d)(5)	
	Line from Schedule A/B: 17.1			100% of fair market value, up to any applicable statutory limit		
	Penn East	\$5.00			11 USC § 522(d)(5)	
	Line from Schedule A/B: 17.2			100% of fair market value, up to any applicable statutory limit		
	Peoples Security	\$250.00			11 USC § 522(d)(5)	
	Line from Schedule A/B: 17.3			100% of fair market value, up to any applicable statutory limit		

Official Form 106C

Schedule C: The Property You Claim as Exempt

page 1 of 2

Are (Sul	you o	claiming a homestead exemption of more than \$170,350? To adjustment on 4/01/22 and every 3 years after that for cases filed on or after the date of adjustment.
	No	
	Yes.	Did you acquire the property covered by the exemption within 1,215 days before you filed this case?
		No
		Yes
	Are (Sul	(Subject to

page 2 of 2

Fill in th	ia information to ident	if				
Debtor 1	nis information to ident Mary G. Roman					
	First Name	Middle Name Last Na	me	A110-1	} ·	
Debtor 2 (Spouse if, filing)	First Name	Middle Name Last Na	me		1	
(Spouse II, Illing)	f list Maille					
United States B	ankruptcy Court for the:	MIDDLE DISTRICT OF PENNSYLVAN DIVISION	IA, WILK	ES-BARRE		
Case number	19-bk-01174					
(if known)						if this is an
				4.4.0	ameno	led filing
Official For	m 106D					
		180 - Harry Olatina Oan	اللمحمد	lara Barana and		40/45
Schedule	D: Creditors	Who Have Claims Secu	irea	ру Ргорегс	У	12/15
Be as complete an needed, copy the known).	nd accurate as possible. If Additional Page, fill it out	two married people are filing together, both a number the entries, and attach it to this form	re equall . On the t	y responsible for su op of any additional	oplying correct informati pages, write your name	ion. If more space is and case number (i
•	s have claims secured by	vour property?				
•	•	s form to the court with your other schedules	. You ha	ve nothing else to re	port on this form.	
	n all of the information be			Ü	•	
		now.				
STATE OF STA	All Secured Claims	Later Control		Column A	Column B	Column C
for each claim. If	more than one creditor has	ore than one secured claim, list the creditor sepa a particular claim, list the other creditors in Part 2 al order according to the creditor 's name.		Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2.1 Consum	er Portfolio			¢46 425 42	\$10,500.00	\$16,125.13
Creditor's Nar		Describe the property that secures the claim	<u>:</u> —	\$16,125.13	\$10,300.00	\$10,123.13
Greditor's Nai	nie	2015 Honda Civic				
PO Box	57099	As of the date you file, the claim is: Check all tapply.	that			
Irvine, C	A 92619-7099	Contingent				
Number, Stre	et, City, State & Zip Code	☐ Unliquidated				
		☐ Disputed				
Who owes the d	lebt? Check one.	Nature of lien. Check all that apply.				
Debtor 1 only		☐ An agreement you made (such as mortgage	or secure	ed		
Debtor 2 only		car loan)				
Debtor 1 and [Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's li	ien)			
	the debtors and another	☐ Judgment lien from a lawsuit				
☐ Check if this community of	claim relates to a lebt	Other (including a right to offset)				
Date debt was in	curred	Last 4 digits of account number				

Add the dollar va	alue of your entries in Col	ımn A on this page. Write that number here:		\$16,125	5.13	
If this is the last	page of your form, add the	e dollar value totals from all pages.		\$16.125	···	

Write that number here:

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

page 1 of 1

Official Form 106D

Fill in this in	formation to identify you	r case:	
	An <u>V</u>		
Debtor 1	Mary G. Romanel First Name	I Middle Name	
Debtor 2	Thorramo		
(Spouse if, filing)	First Name	Middle Name Last Name	
United States B	ankruptcy Court for the:	MIDDLE DISTRICT OF PENNSYLVANIA, WILKES-BARRE DIVISION	
Case number	19-bk-01174		
(if known)	10-51(-0111-4		☐ Check if this is an
			amended filing
Official For	m 106E/E		
		he Have Unecoured Claims	12/15
		ho Have Unsecured Claims Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIOR	
the Continuation I case number (if ki	Page to this page. If you hav	operty. If more space is needed, copy the Part you need, fill it out, number the entri e no information to report in a Part, do not file that Part. On the top of any addition secured Claims	es in the boxes on the left. Attach al pages, write your name and
1. Do any credi	tors have priority unsecured	l claims against you?	
No. Go to	Part 2.		
☐ Yes.			
	All of Your NONPRIORIT	/ Unsecured Claims	
	tors have nonpriority unsec		
□ No. You h	ave nothing to report in this pa	art. Submit this form to the court with your other schedules.	
		,	
Yes.			
unsecured cla than one cred	im list the creditor senarately	ilms in the alphabetical order of the creditor who holds each claim. If a creditor has for each claim. For each claim listed, identify what type of claim it is. Do not list claims a st the other creditors in Part 3.If you have more than three nonpriority unsecured claims f	ready included in Part 1. If more
2.			Total claim
4.1 Abby I	Russin, PHD, LLC	Last 4 digits of account number	\$154.00
	ity Creditor's Name	When was the debt incurred?	
/80 Di	erce St Ste 110	Wileli was the dept incurred:	
	ton, PA 18704-5512		
	Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who inc	urred the debt? Check one.		
Debte	or 1 only	☐ Contingent	
☐ Debte	or 2 only	☐ Unliquidated	
☐ Debte	or 1 and Debtor 2 only	☐ Disputed	
☐ At lea	ast one of the debtors and and		
	k if this claim is for a comr	•	
debt	alm aubloot to affect?	☐ Obligations arising out of a separation agreement or divorce that you report as priority claims	did not
	aim subject to offset?	report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts	
■ No		<u> </u>	
☐ Yes		Other. Specify	_

Page 1 of 9

Debto	r 1 Romanelli, Mary G.	44700	Case number (if known)	19-bk-01174	
4.2	Capio Partners LLC Nonpriority Creditor's Name	Last 4 digits of account number When was the debt incurred?	8525	·	\$1,001.27
	PO Box 3209 Sherman, TX 75091-3209 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply		
	■ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only	☐ Contingent ☐ Unliquidated ☐ Disputed			
	☐ At least one of the debtors and another ☐ Check if this claim is for a community debt Is the claim subject to offset? ■ No	Type of NONPRIORITY unsecure ☐ Student loans ☐ Obligations arising out of a separeport as priority claims ☐ Debts to pension or profit-sharing	aration agreement or divorce ng plans, and other similar de		
	☐ Yes	Other. Specify Lehigh Va	пеу ноѕрітаі		LAW III.
4.3	Capital One Nonpriority Creditor's Name 1680 Capital One Dr	Last 4 digits of account number - When was the debt incurred?			\$255.41
	McLean, VA 22102-3407 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply		
	■ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? ■ No	☐ Contingent ☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecure ☐ Student loans ☐ Obligations arising out of a sep report as priority claims ☐ Debts to pension or profit-shari	aration agreement or divorce		
	☐ Yes	Other. Specify			
4.4	College Misercordia Nonpriority Creditor's Name 301 Lake St	Last 4 digits of account number When was the debt incurred?			\$1,009.85
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply		
	Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset?	☐ Contingent ☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecure ☐ Student loans ☐ Obligations arising out of a sepreport as priority claims ☐ Debts to pension or profit-shari	aration agreement or divorce		
	☐ Yes	Other. Specify			

Page 2 of 9

Debto	r 1 Romanelli, Mary G.	Case number (f known) 19-bk-01174	
4.5	Commonwealth Health Nonpriority Creditor's Name	Last 4 digits of account number When was the debt incurred?	\$0.00
	575 N River St Wilkes Barre, PA 18764-0999 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.6	Convergent Outsourcing, Inc. Nonpriority Creditor's Name	Last 4 digits of account number When was the debt incurred?	\$472.55
	800 SW 39th St Ste 100P Renton, WA 98057-4975 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	₽ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify	
4.7	Credit Collection Service	Last 4 digits of account number	\$223.37
	Nonpriority Creditor's Name c/o Progressive Advance	When was the debt incurred?	
	Insurance, Co. 725 Canton St Norwood, MA 02062-2679 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
		☐ Student loans	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify	
	00	Strong Opening	

Schedule E/F: Creditors Who Have Unsecured Claims

Page 3 of 9

Debto	r 1 Romanelli, Mary G.	Case number (f known) 19-bk-01174	
4.8	Credit One Bank	Last 4 digits of account number	\$380.00
	Nonpriority Creditor's Name	When was the debt incurred?	
	6801 S Cimarron Rd Las Vegas, NV 89113-2273 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No No	\square Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify	
4.9	Discover	Last 4 digits of account number	\$706.00
	Nonpriority Creditor's Name	When was the debt incurred?	
	PO Box 6103 Carol Stream, IL 60197-6103 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify	
4.10	Financial Recovery Services, Inc	Last 4 digits of account number	\$706.01
	Nonpriority Creditor's Name	When was the debt incurred?	
	PO Box 385908 Minneapolis, MN 55438-5908		
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	_	
	Debtor 1 only	Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim: ☐ Student loans	
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	

Schedule E/F: Creditors Who Have Unsecured Claims

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Debtor	1 Romanelli, Mary G.	Case number (f known) 19-bk-01174	
4.11	First Premiere Bank Nonpriority Creditor's Name	Last 4 digits of account number When was the debt incurred?	\$572.00
	PO Box 5529 Sioux Falls, SD 57117-5529 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.12	Fortis Institute Nonpriority Creditor's Name	Last 4 digits of account number	\$0.00
	Nonpholity Creditor's Name	When was the debt incurred?	
	517 Ash St Scranton, PA 18509-2902		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts	
	No No	·	
	Yes	Other. Specify	
4.13	Geisinger Medical Center	Last 4 digits of account number	\$0.00
	Nonpriority Creditor's Name	When was the debt incurred?	
	100 N Academy Ave Danville, PA 17822-9800	As of the date you file, the claim is: Check all that apply	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is. Check all that apply	
		Clouding and	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	☐ Student loans	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify	
	 		

Schedule E/F: Creditors Who Have Unsecured Claims

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Debtor	1 Romanelli, Mary G.	Case number (f known) 19-bk-01174	
4.14	Lehigh Valley Hospital Nonpriority Creditor's Name c/o CF Medical LLC	Last 4 digits of account number 8525 When was the debt incurred?	\$500.64
	2222 Texoma Pkwy Ste 150 Sherman, TX 75090-2481 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset?	□ Contingent □ Unliquidated □ Disputed Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.15	Luzerne County Community College Nonpriority Creditor's Name	Last 4 digits of account number	\$3,244.00
	1333 S Prospect St Nanticoke, PA 18634-3814 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt	☐ Contingent ☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset? ■ No □ Yes	report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify	
4.16	LVNV Funding LLC Nonpriority Creditor's Name	Last 4 digits of account number When was the debt incurred?	\$255.00
	PO Box 10584 Greenville, SC 29603-0584 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community	☐ Contingent ☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ Student loans	
	debt Is the claim subject to offset? ■ No	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	

Schedule E/F: Creditors Who Have Unsecured Claims

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Debto	r 1 Romanelli, Mary G.	Case number (f known) 19-bk-01174	
4.17	National Recovery Agency Nonpriority Creditor's Name	Last 4 digits of account number When was the debt incurred?	\$213.00
	PO BOX 67015 Harrisburg, PA 17106-7015 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify	
4.18	One Main Financial Nonpriority Creditor's Name	Last 4 digits of account number 8504	\$4,233.06
	tionpriority organic organic	When was the debt incurred?	
	PO Box 740594 Cincinnati, OH 45274-0594 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	_	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim: ☐ Student loans	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify	
4.19	Orchard Bank	Last 4 digits of account number	\$0.00
	Nonpriority Creditor's Name	When was the debt incurred?	
	11801 Mississippi Ave Ste 100 Los Angeles, CA 90025-6114 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify	

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Debtor	1 Romanelli, Mary G.	Case number (if known) 19-bk-01174	A11007
4.20	Portfolio Recovery Associates, LLC Nonpriority Creditor's Name PO Box 12914	Last 4 digits of account number When was the debt incurred?	\$848.00
	Norfolk, VA 23541 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No No	\square Debts to pension or profit-sharing plans, and other similar debts	1
	Yes	Other. Specify	
4.21	UFCW Federal Credit Union Nonpriority Creditor's Name	Last 4 digits of account number	\$9,719.00
	Nonpholic Greater & Name	When was the debt incurred?	
	570 Market St Kingston, PA 18704-4530 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts	
	No		
	Yes	Other. Specify 2 Loans	NAME OF THE PROPERTY OF THE PR
4.22	US Dept of ED/GLELSI	Last 4 digits of account number	\$64,808.00
	Nonpriority Creditor's Name	When was the debt incurred?	
	225 Old Falls St Niagara Falls, NY 14303-1262 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify	
Part 3:	List Others to Be Notified About a Debt T	hat You Already Listed	

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Name and Address
Official Form 106 E/F

On which entry in Part 1 or Part 2 did you list the original creditor?

Schedule E/F: Creditors Who Have Unsecured Claims

Page 8 of 9

Debtor 1 Romanelli, Mary G.		Case number (f known)	19-bk-01174
Luzerne County Community College 1333 S Prospect St	Line <u>4.8</u> of (<i>Check one</i>):	☐ Part 1: Creditors with Prior ☐ Part 2: Creditors with None	
Nanticoke, PA 18634-3814			

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				•	Total Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Fotal claims	6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
nom rait i	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
					Total Claim
	6f.	Student loans	6f.	\$	64,808.00
otal claims from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	24,493.16
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	89,301.16

Last 4 digits of account number

Debtor 1	Mary G. Romane	lli		
	First Name	Middle Name	Last Name	
Debtor 2				
Spouse if, filing)	First Name	Middle Name	Last Name	
Jnited States Ba	nkruptcy Court for the:	MIDDLE DISTRICT OF DIVISION	PENNSYLVANIA, WILKES-BARRE	
Case number	19-bk-01174			

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes, Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code

State what the contract or lease is for

2.1 Chris Williams

Lease for residence

Page 1 of 1

					1
Fill i	n this information to iden	ntify your case:			
Debtor 1	Mary G. Roman	nelli Middle Name	Last Name		
Debtor 2			LastNess		
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States	Bankruptcy Court for the	MIDDLE DISTRICT OF DIVISION	PENNSYLVANIA, WILKE	S-BARRE	
Case numbe	19-bk-01174				☐ Check if this is an
(if known)					amended filing
Official	Form 106H				
	ile H: Your Co	debtors			12/15
No Yes 2. Within Californi No. G	n the last 8 years, have y a, Idaho, Louisiana, Neva Go to line 3. Did your spouse, former sp	da, New Mexico, Puerto Rico oouse, or legal equivalent live v	operty state or territory , Texas, Washington, and vith you at the time?	? (Community propert I Wisconsin.)	iy states and territories include Arizona,
11 0	gain as a codebtor only i Schedule E/F (Official Fo	fikat narcan ic a awarantar	or cosigner wake sure	vou nave usieu me	g with you. List the person shown in creditor on Schedule D (Official For lule E/F, or Schedule G to fill out
	olumn 1: Your codebtor ame, Number, Street, City, State a	nd ZIP Code		Column 2: The c Check all schedu	reditor to whom you owe the debt ules that apply:
3.1				_ Schedule D, I	
	ame			☐ Schedule E/F ☐ Schedule G,	
	umber Street ity	State	ZIP Code		
3.2				☐ Schedule D,	
	lame			☐ Schedule E/F ☐ Schedule G,	· · · · · · · · · · · · · · · · · · ·
	lumber Street city	State	ZIP Code	_	

						-				
	n this information to									
Deb	otor 1	Mary G. Rom	anelli	in the second of						
	otor 2 use, if filing)									
Unit	ed States Bankrup	tcy Court for the:	MIDDLE DISTRICT O WILKES-BARRE DIVI							
Cas (If kn		bk-01174				Ar		•	postpetition c	hapter 13
<u>Of</u>	ficial Form	106I				M	M / DD/ Y	YYY		
Sc	chedule I: `	Your Inco	me							12/15
supp	olying correct infouse. If you are sep tha separate shee	rmation. If you ar	ole. If two married peop re married and not filin spouse is not filing wit n the top of any additio	g jointly, and your s h vou. do not include	pouse is liv e informatic	ing with yo on about vo	ou, includ our spous	e informati se. If more s	on about yo space is nee	our eded,
1.	Fill in your emploinformation.	oyment		Debtor 1			Debtor 2	or non-filir	ng spouse	
	If you have more than one job, attach a separate page with information about additional employers.			Employed			☐ Emplo	yed		
			• •	☐ Not employed			☐ Not er	nployed		
	Include part-time,	seesonal or	Occupation	Nurse						
	self-employed wor		Employer's name	Manor Care						
	Occupation may i homemaker, if it a	nclude student or applies.	Employer's address	200 2nd Ave Kingston, PA 1	8704-5722					
			How long employed the	nere? <u>3 mont</u>	hs					
Par	t 2: Give De	tails About Mont	hly Income							
unle	ss you are separate	d.	e you file this form. If y than one employer, com							
	e, attach a separate									
						For Deb	tor 1	For Debt	or 2 or g spouse	
2.	List monthly gro deductions). If no	ess wages, salary ot paid monthly, ca	, and commissions (be lculate what the monthly	fore all payroll wage would be.	2.	\$3,	965.85	\$	N/A	
3.	Estimate and list	t monthly overtin	ne pay.		3. +	\$	0.00	+\$	N/A	
4.	Calculate gross	Income. Add line	2 + line 3.		4.	\$3,96	5.85	\$	N/A	

Official Form 106l Schedule I: Your Income page 1

Debtor 1	Romanelli, Mary G.		Case	number (if known)	19-bk-0117	4
Co	py line 4 here	4.	For	Debtor 1 3,965.85	For Debtor	
CO	py line 4 nere	٦.	Ψ_	3,303.03	Ψ	N/A
5. Lis	t all payroll deductions:		_			
5a.	Tax, Medicare, and Social Security deductions	5a.	\$_	609.10	\$	N/A
5b.	·	5b.	\$	0.00	\$	N/A
5c.	Voluntary contributions for retirement plans	5c.	\$_	0.00	\$	N/A
5d.	Required repayments of retirement fund loans	5d.	\$_ \$	0.00	\$ \$	N/A
5e.	Insurance	5e. 5f.	* *	0.00	\$	N/A N/A
5f.	Domestic support obligations Union dues	51. 5g.	\$ \$	0.00	φ	N/A
5g. 5h.		5g. 5h.+	·		+ \$	N/A
J11.	Pa LS Tax		\$-	4.33	\$	N/A
	Uniform Dectuction		*-	10.83	\$	N/A
	Unemployment Tax		<u> </u>	2.38	\$	N/A
			· —		\$	
	d the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	Φ —	872.54	`	N/A
	Iculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$ _	3,093.31	\$	N/A
8. Lis 8a.	profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total		•			
	monthly net income.	8a.	\$_	0.00	\$	N/A
8b.		8b.	\$_	0.00	\$	N/A
8c.	regularly receive Include alimony, spousal support, child support, maintenance, divorce	; 8c.	\$	0.00	\$	N/A
04	settlement, and property settlement. Unemployment compensation	8d.	\$-	0.00	<u>*</u>	N/A N/A
8d. 8e.		8e.	ς \$	0.00	\$	N/A
8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.	* 	0.00	\$	N/A
8g.		8g.	\$	0.00	\$	N/A
8h.		8h.+	\$	0.00	+ \$	N/A
9. Ad	d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	0.00	\$	N/A
	Iculate monthly income. Add line 7 + line 9. d the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$		3,093.31 + \$_	N/A	= \$ 3,093.31
inc oth Do	Ate all other regular contributions to the expenses that you list in Schedule lude contributions from an unmarried partner, members of your household, your defer friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not avecify:	ependen				+\$ 0.00
12. Ad	d the amount in the last column of line 10 to the amount in line 11. The resite that amount on the Summary of Schedules and Statistical Summary of Certain				ome.	\$ 3,093.31
13. Do	you expect an increase or decrease within the year after you file this form No. Yes. Explain:	?				monthly income

Official Form 106l Schedule I: Your Income page 2

Be as complete and accurate as possible. If two married people are filling together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case numbe (if known). Answer every question. Part Describe Your Household	Fill in this info	rmation to identify yo	ur case:					
Destination	Debtor 1	Mary G. Rom	nanelli	•		Chec	k if this is:	
United States Bankruptor Court for the MIDDLE DISTRICT OF PENNSYLVANIA, MILKES-BARRE DIVISION MILK	Debtor 2	-					-	ng postpetition chapter 13
Official Form 106J Schedule J: Your Expenses Schedule J: Your Expenses Schedule J: Your Expenses Schedule J: Your Expenses 12/1 Be as complete and accurate as possible. If two married people are filling together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (fixnown). Answer every question. In is this a joint case? No. Go to line 2. Yes. Do you have dependents? No. Do not list Debtor 1 and Debtor 2. Do not list Debtor 1 and Debtor 2. Do not list Debtor 1 and Debtor 2. Do not state the dependents names. Son		g)			44			
Official Form 106J Schedule J: Your Expenses 12/1 Be as complete and accurate as possible. If two married people are filling together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (information.) If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (information.) If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (information.) If it is this a joint case? No. Os to line 2. Yes. Do to the case? Yes. Do to the case? Yes. Do to to list Debtor 1 and Yes. Fill out this information for Debtor 2. Do you have dependents? No. Do not list Debtor 1 and Debtor 2. Do not state the dependent snames. Son 27 Yes Yes No. No. Yes Son 27 Yes No. No. Yes No. Yes No. Yes No. Yes No. Yes No. No. Yes No. Yes No. Yes No. Yes No. No. Yes No. Ye	United States B	ankruptcy Court for the:			VANIA,	ī	MM / DD / YYYY	
Official Form 106J Schedule J: Your Expenses 12/16 Sa complete and accurate as possible, if two married people are filing together, both are equally responsible for supplying correct information, if more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case numbe (if known). Answer every question. Describe Your Household Is this a joint case? No. Go to line 2. Yes. Does Obbtor 2 live in a separate household? No. Go to line 2. Yes. Does Obbtor 2 must file Official Form 106.1-2, Expenses for Separate Household's Debtor 2. Do not list Debtor 1 and Debtor 1 and Debtor 1 and Debtor 2. Do not list Debtor 1 and Debtor 3. Son. Son. Son. Son. 27. No. No. Son. Son. 23. Yes. Son. No. Yes. Son. 24. Yes. No. No. No. No. No. No. No. N		19-bk-01174		data da				
Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information,	(If Known)							
Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information,	Official	Form 106.I						
Be as complete and accurate as possible. If two married people are filling together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.			 Expen	ses				12/1:
Is this a joint case? No. Go to line 2. No. Go to line 3. No. Go to line	Be as comple information.	ete and accurate as If more space is nee	possible. I ded, attac	f two married people are	filing together, both orm. On the top of a	n are equally ny additiona	responsible for s al pages, write you	upplying correct r name and case numbe
No. Go to line 2. Yes. Does Debtor 2 live in a separate household? Yes. Destor Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2.			nold					
Ves. Does Debtor 2 live in a separate household? No		-						
Yes. Debtor 2 must file Official Form 106J-2 Expenses for Separate Householdof Debtor 2. Do you have dependents? No			n a separat	e household?				
2. Do you have dependents?	_		•					
Do not list Debtor 1 and Debtor 2. Do not state the dependents names. Do not state the dependents names. Son 27 Yes No Son 23 Yes No Son 23 Yes No No Son 23 Yes No No Son 3. Do your expenses include expenses of people other than yourself and your dependents? Estimate Your Ongoing Monthly Expenses Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy list filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106I.) If not included in line 4: 4a. Real estate taxes 4b. Property, homeowner's, or renter's insurance 4c. Home maintenance, repair, and upkeep expenses 4d. \$ 0.00 30.00 4d. Home maintenance, repair, and upkeep expenses 4d. \$ 0.000	[☐ Yes. Debtor 2 mus	t file Officia	al Form 106J-2, Expenses f	or Separate Househ	old of Debtor	2.	
Debtor 2. Do not state the dependents names. Son 27 Yes Yes Yes Do not state the dependents names. Son 27 Yes Yes No No No Son 23 Yes No Your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy listing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy listing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy listing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy listing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy listing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a dat	2. Do you	have dependents?	□ No					
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Son 23 Yes No Son 22 Yes No No Son 22 Yes No No Son 22 Yes Yes No No Yes 3. Do your expenses include expenses of people other than yourself and your dependents? Estimate Your Ongoing Monthly Expenses Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106I.) If not included in line 4: 4a. Real estate taxes 4a. \$ 0.00 4b. Property, homeowner's, or renter's insurance 4c. Home maintenance, repair, and upkeep expenses 4d. \$ 0.00 4d. Homeowner's association or condominium dues Association of the service o					0		27	
Son 23	depende	ents names.			5011			
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3. Do your expenses include expenses of people other than yourself and your dependents? Estimate Your Ongoing Monthly Expenses Estimate your expenses as of your bankruptcy filling date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filled. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106I.) 4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. If not included in line 4: 4a. Real estate taxes 4a. \$ 0.00 4b. Property, homeowner's, or renter's insurance 4c. Home maintenance, repair, and upkeep expenses 4d. \$ 0.00 4d. Homeowner's association or condominium dues					Son		22	_
3. Do your expenses include expenses of people other than yourself and your dependents? Part 2: Estimate Your Ongoing Monthly Expenses Estimate your expenses as of your bankruptcy filling date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filled. If this is a supplemental <i>Schedule J</i> , check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on <i>Schedule I</i> : <i>Your Income</i> (Official Form 106L) 4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. If not included in line 4: 4a. Real estate taxes 4b. Property, homeowner's, or renter's insurance 4c. Home maintenance, repair, and upkeep expenses 4d. \$ 0.00 4d. Homeowner's association or condominium dues					,			□No
expenses of people other than yourself and your dependents? Part 2:	0						,	☐ Yes
Estimate your expenses as of your bankruptcy filling date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental <i>Schedule J</i> , check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on <i>Schedule I: Your Income</i> (Official Form 106I.) 4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. If not included in line 4: 4a. Real estate taxes 4b. Property, homeowner's, or renter's insurance 4c. Home maintenance, repair, and upkeep expenses 4d. \$ 0.00 4d. Homeowner's association or condominium dues	expense	es of people other th	an \square	,				
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4a.Real estate taxes4a.\$0.004b.Property, homeowner's, or renter's insurance4b.\$30.004c.Home maintenance, repair, and upkeep expenses4c.\$0.004d.Homeowner's association or condominium dues4d.\$0.00					clude first mortgage	4. \$		800.00
4b. Property, homeowner's, or renter's insurance 4c. Home maintenance, repair, and upkeep expenses 4d. Homeowner's association or condominium dues 4d. \$ 0.00	If not in	cluded in line 4:						
4b. Property, homeowner's, or renter's insurance 4c. Home maintenance, repair, and upkeep expenses 4d. Homeowner's association or condominium dues 4d. \$ 0.00	4a, R	eal estate taxes				4a. \$		0.00
4d. Homeowner's association or condominium dues 4d. \$ 0.00			or renter's	insurance				
					ne equity loans			

Official Form 106J Schedule J: Your Expenses page 1

Deb	tor 1	Romane	Ili, Mary G.	Case numb	er (if known)	19-bk-01174
c	411141 -					
6.	Utilitie 6a.		heat, natural gas	6a.	\$	325.00
		•	ver, garbage collection	6b.	\$	100.00
			e, cell phone, Internet, satellite, and cable services	6c.	\$	305.00
			oolf g	6d.	\$	100.00
		Cable			\$	125.00
	_	Cell Pho	no	_	\$	303.00
		WiFi			\$	90.00
7.	_		ekeeping supplies		\$	600.00
8.			hildren's education costs	8.	\$	0.00
9.			ry, and dry cleaning	9.	\$	200.00
10.		· ·	roducts and services	10.	\$	100.00
11.		•	ntal expenses	11.	\$	400.00
			Include gas, maintenance, bus or train fare.			200.00
	Do not	t include ca	ar payments.	12.	\$	300.00
13.			clubs, recreation, newspapers, magazines, and books	13.	\$	50.00
14.			ributions and religious donations	14.	\$	0.00
15.	Insura		the state of firms are an included in lines 4 or 20			
		t include in Life insura	surance deducted from your pay or included in lines 4 or 20.	15a.	\$	0.00
		Health ins		15b.		200.00
		Vehicle ins		15c.	\$	165.00
			rance. Specify:	15d.	\$	0.00
16			clude taxes deducted from your pay or included in lines 4 or 20.			
	Specif	fy:		16.	\$	0.00
17.			ease payments: ents for Vehicle 1	17a.	\$	388.85
			ents for Vehicle 2	17b.		0.00
		Other. Spe		17c.	\$	0.00
		Other. Spe		17d.	\$	0.00
18.	Your	payments	of alimony, maintenance, and support that you did not report as		_	0.00
	deduc	cted from v	your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$	0.00
19.			s you make to support others who do not live with you.		\$	0.00
	Specif	fy:	the standard in the standard for this form on on Cohod	19.	rIncomo	
20.			erty expenses not included in lines 4 or 5 of this form or on <i>Sched</i> s on other property	20a.	\$	0.00
		Real estate		20b.		0.00
			nomeowner's, or renter's insurance	20c.		0.00
			ice, repair, and upkeep expenses	20d.		0.00
			er's association or condominium dues	20e.		0.00
21		: Specify:	of o dobootation of condentition and	21.	+\$	0.00
22.			monthly expenses			4 504 05
			through 21.		\$	4,581.85
			2 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
	22c. A	Add line 22a	a and 22b. The result is your monthly expenses.		\$	4,581.85
23.	Calcu	ılate vour ı	monthly net income.			
	23a.	Copy line	12 (your combined monthly income) from Schedule I.	23a.		3,093.31
	23b.	Copy your	monthly expenses from line 22c above.	23b.	-\$	4,581.85
	23c.	Subtract y The result	our monthly expenses from your monthly income. is your <i>monthly net income</i> .	23c.	\$	-1,488.54
24.	For exa	ample, do yo cation to the o.	an increase or decrease in your expenses within the year after you ou expect to finish paying for your car loan within the year or do you expect your terms of your mortgage? Explain here:	ı file this f mortgage p	orm? payment to incre	ease or decrease because of a
	⊔ Ye	ъ.	<u> Бургані пото.</u>			

Debtor 1	Mary G. Romane	III Middle Name	Last Name	
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name	
United States B	ankruptcy Court for the:	MIDDLE DISTRICT OF I	PENNSYLVANIA, WILKES-BARRE	
Case number (if known)	19-bk-01174			☐ Check if this is an amended filing
Official For	m 106Dec			
		n Individual	Debtor's Schedules	12/15

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below	
Did you pay or agree to pay someone who is NOT	an attorney to help you fill out bankruptcy forms?
■ No	
Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119)
that they are true and correct. X /s/ Mary Romanelli Many Romanelli	the summary and schedules filed with this declaration and **ACONOMIC X Signature of Debtor 2**
Signature of Debtor 1	

file:	Fill in this	information to identi	fy your case:			
De	btor 1	Mary G. Roman	FOR THE BOARD AND FOR A COMMENT OF THE	を見る 「日本とおいい日本に関す		
		First Name	Middle Name	Last Name		
1	btor 2 ouse if, filing)	First Name	Middle Name	Last Name		
Uni	ited States Ban	kruptcy Court for the:	MIDDLE DISTRICT OF PE	NNSYLVANIA, WILKES-BA	RRE	
1	se number 19	9-bk-01174				Check if this is an amended filing
St	as complete an	of Financial A	Affairs for Individule. If two married people are attach a separate sheet to thi	filing together, both are ed	qually responsible for supp	
	•	r every question.	rital Status and Where You L	ived Refore		
and solitable				IVOG DOIOIG		
1.	_	current marital statu	S?			
		ied				
2.	During the las	st 3 vears, have you	lived anywhere other than wh	nere you live now?		
	-	,	·····	·····		
	■ No □ Yes. List	all of the places you liv	ed in the last 3 years. Do not in	clude where you live now.		
	Debtor 1 Price	or Address:	Dates Debtor 1 liv	ved Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
3. state	Within the las	st 8 years, did you ev s include Arizona, Cal	er live with a spouse or legal ifornia, Idaho, Louisiana, Neva	I equivalent in a communit da, New Mexico, Puerto Ric	y property state or territory o, Texas, Washington and V	y? (Community property Visconsin.)
	■ No		edule H: Your Codebtors (Offici			·
Par	rt.2 Explain	the Sources of You	r Income			
4.	Fill in the total If you are filing	amount of income you	nployment or from operating u received from all jobs and all ave income that you receive tog	businesses, including part-t	ime activities.	ndar years?
	□ No	n the details.				
	(CS.FIII)	n me ucialis.	Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
Fro the	om January 1 o e date you filed	f current year until for bankruptcy:	■ Wages, commissions, bonuses, tips	\$8,900.00	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		☐ Operating a business	

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Part 4: Identify Legal Actions, Repossessions, and Foreclosures

9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications,

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Check all that apply and fill in the details below. No. Go to line 11.	Debt	or 1 <u>Romanel</u>	li, Mary G.		Case number (if k	(nown) 19-bk-01174	
No							
Yes. Fill in the details. Case number Misericordia University vs. Mary Magistrate Pending Pen		and contract dispu	tes.				
Case title Case number Misericordia University vs. Mary Romanelli CV-0117-2018 Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. Creditor Name and Address Describe the Property Explain what happened Within 90 days before you filed for bankruptcy, did you greative, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? No Yes. Fill in the details. Creditor Name and Address Describe the action the creditor took Date action was Amount taken Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? No Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person? No Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person? No Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person Describe the gifts or contributions with a total value of more than \$600 to any charrity? No Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total nore than \$500 charrity s Name Address. No Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total nore than \$500 charrity s Name Address. List Certain Losses		□ No					
Case number Misericordia University vs. Mary Romanelli CV-0117-2018			e details.				
Romanelli CV-0117-2018				Nature of the case	Court or agency	Status of the c	ase
No. Go to line 11. Yes. Fill in the information below. Creditor Name and Address Describe the Property Explain what happened 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? No Yes. Fill in the details. Creditor Name and Address Describe the action the creditor took Date action was Amount taken 12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? No Yes Part 5:** List Certain Gifts and Contributions 13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? No Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per Describe the gifts Dates you gave the gifts Person to Whom You Gave the Gift and Address: Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? No Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total more than \$600 charity's Name Address (Number, Street, City, State and ZIP Code)		Romanelli	Iniversity vs. Mary		Magistrate	☐ On appeal	
Yes. Fill in the information below. Creditor Name and Address Describe the Property Date Value of the property	10.	Within 1 year bef Check all that app	ore you filed for bankruptcy ly and fill in the details below.	, was any of your prop	erty repossessed, foreclosed, ga	arnished, attached, sei	zed, or levied?
Explain what happened 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? No Yes. Fill in the details. Creditor Name and Address Describe the action the creditor took Date action was Amount taken 12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? No Yes Part 5: List Certain Gifts and Contributions 13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? No Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per Describe the gifts Dates you gave the gifts Person to Whom You Gave the Gift and Address: 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? No Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total Describe what you contributed Dates you Charity's Name Address (Number, Street, City, State and ZIP Code) Part 5: List Certain Losses							
Explain what happened 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? No Yes. Fill in the details. Creditor Name and Address Describe the action the creditor took Date action was Amount taken 12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? No Yes Part 5: List Certain Gifts and Contributions 13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? No Yes, Fill in the details for each gift. Gifts with a total value of more than \$600 per Describe the gifts Person to Whom You Gave the Gift and Address: 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? No Yes, Fill in the details for each gift or contribution. Gifts or contributions to charities that total Describe what you contributed Dates you Value contributed No Charity's Name Address (kumber, Street, City, State and ZIP Code) Part 6: List Certain Losses		Creditor Name a	nd Address	Describe the Property		Date	Value of the
accounts or refuse to make a payment because you owed a debt? No Yes. Fill in the details. Creditor Name and Address Describe the action the creditor took Date action was Amount taken No Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? No Yes Part 5: List Certain Gifts and Contributions Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? No Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per Describe the gifts Dates you gave the gifts Person to Whom You Gave the Gift and Address: Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? No Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total Describe what you contributed Dates you Charity's Name Address (Number, Street, City, State and ZIP Code) Part 6: List Certain Losses				Explain what happene	ed		property
court-appointed receiver, a custodian, or another official? No Yes Part 5: List Certain Gifts and Contributions 13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? No Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per Describe the gifts Person to Whom You Gave the Gift and Address: 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? No Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total Describe what you contributed Charity's Name Address (Number, Street, City, State and ZIP Code) Part 6: List Certain Losses		■ No □ Yes. Fill in th	e details.		e creditor took		Amount
Part 5: List Certain Gifts and Contributions 13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? No Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per Describe the gifts Dates you gave the gifts Person to Whom You Gave the Gift and Address: 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? No Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code) Part 6: List Certain Losses	12.	Within 1 year bef court-appointed	ore you filed for bankruptcy receiver, a custodian, or and	, was any of your prop other official?	erty in the possession of an ass	ignee for the benefit o	f creditors, a
13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? No		_				V	
No	Part	5: List Certain	n Gifts and Contributions				
Gifts with a total value of more than \$600 per person Describe the gifts Person to Whom You Gave the Gift and Address: 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? No Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total Describe what you contributed Dates you contributed Contributed Charity's Name Address (Number, Street, City, State and ZIP Code) Part 6: List Certain Losses	13.	B-02/88	efore you filed for bankrupto	y, did you give any gift	ts with a total value of more than	n \$600 per person?	
Person to Whom You Gave the Gift and Address: 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? No Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total Describe what you contributed Dates you contributed Charity's Name Address (Number, Street, City, State and ZIP Code) Part 6: List Certain Losses				_ ,, ,, ,,		D (Malua
Address: 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? No Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total Describe what you contributed Dates you Value more than \$600 contributed Charity's Name Address (Number, Street, City, State and ZIP Code)			I value of more than \$600 pe	r Describe the gifts	5		value
No ☐ Yes. Fill in the details for each gift or contribution. ☐ Gifts or contributions to charities that total Describe what you contributed Dates you Value more than \$600 contributed Charity's Name Address (Number, Street, City, State and ZIP Code) Part 6: List Certain Losses			າ You Gave the Gift and				
Gifts or contributions to charities that total Describe what you contributed Dates you value more than \$600 contributed Charity's Name Address (Number, Street, City, State and ZIP Code) Part 6: List Certain Losses		-	efore you filed for bankrupto	y, did you give any gif	ts or contributions with a total v	alue of more than \$600	to any charity?
more than \$600 contributed Charity's Name Address (Number, Street, City, State and ZIP Code) Part 6: List Certain Losses			_			D (V. 6.
		more than \$600 Charity's Name		Describe what yo	ou contributed		value
	Pari	6: List Certai	n Losses				
15. WITHIN I YEAR DEFORE YOU HIED TO DANKIUDICY OF SINCE YOU HIED TO DANKIUDICY, DID YOU IOSE ANYTHING DECAUSE OF HIEL, THE, OTHER DISASTER,				or since you filed for	bankruptcy, did you lose anythir	ng because of theft, fire	e, other disaster,

Part						our bonofit alocad
9	Within 1 year before you filed for bankrupt sold, moved, or transferred? Include checking, savings, money market, houses, pension funds, cooperatives, asso	or other financial accoเ	ınts; certificates	of deposit		
	☐ Yes. Fill in the details.					1
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of acco	ount or	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
21.	Do you now have, or did you have within 1 cash, or other valuables?	year before you filed fo	or bankruptcy, ar	ny safe del	posit box or other depos	sitory for securities,
	■ No □ Yes. Fill in the details.					
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had a Address (Numbe and ZIP Code)		Describ	e the contents	Do you still have it?
22.	Have you stored property in a storage uni	t or place other than yo	ur home within 1	year befo	re you filed for bankrup	tcy?
	■ No □ Yes. Fill in the details.					
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has o to it? Address (Number and ZIP Code)	or had access	Describ	e the contents	Do you still have it?
Pai	rt 9: Identify Property You Hold or Contr					
23.	Do you hold or control any property that someone.	someone else owns? In	clude any proper	ty you boi	rrowed from, are storing	for, or hold in trust for
	■ No					
	☐ Yes. Fill in the details.			- "	At a management	Value
	Owner's Name Address (Number, Street, City, State and ZIP Code	Where is the p (Number, Street, C Code)		Descri	oe the property	Yuluc
Pa	art 10: Give Details About Environmental I	nformation				
For	r the purpose of Part 10, the following defin	itions apply:				
	Environmental law means any federal, statoxic substances, wastes, or material into controlling the cleanup of these substance	the air, land, soil, surfa es, wastes, or material.	ice water, ground	awater, or	other medium, moldam	g statutes of regulations
	Site means any location, facility, or prope	erty as defined under an esal sites.	y environmental			
18	Hazardous material means anything an e material, pollutant, contaminant, or simila	nvironmental law define ar term.	es as a hazardou	s waste, h	azardous substance, to	xic substance, nazardou
	eport all notices, releases, and proceedings					
24.	. Has any governmental unit notified you t	hat you may be liable o	r potentially liabl	e under or	r in violation of an envir	onmental law?
	No Yes. Fill in the details.					
	Name of also	Governmenta	Lunit	En	vironmental law, if you	Date of notice

Address (Number, Street, City, State and ZIP Code)

Address (Number, Street, City, State and

know it

ZIP Code)

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Del	otor 1	Romanelli, Mary G.			Ca	ase number(if known)	19-bk-01174	
		,						
25.	Have	you notified any governmenta	l unit of any re	lease of hazardous material?				
		No Yes. Fill in the details.						
		e of site ress (Number, Street, City, State and Zi		Governmental unit Address (Number, Street, City, Stat ZIP Code)	e and	Environmental law know it	v, if you	Date of notice
26.	Have	you been a party in any judicia	al or administra	ative proceeding under any e	nvironn	nental law? Include	settlements and	l orders.
	`	No Yes. Fill in the details.						
		e Title e Number		Court or agency Name Address (Number, Street, City, Stat and ZIP Code)		ature of the case		Status of the case
Par	t 11:	Give Details About Your Busin	ness or Conne	ctions to Any Business				
27.	Withi	n 4 years before you filed for b	ankruptcy, did	you own a business or have	any of	the following conne	ections to any b	usiness?
		☐ A sole proprietor or self-em		-				
	[☐ A member of a limited liabili	ty company (L	LC) or limited liability partner	ship (Ll	LP)		
	[☐ A partner in a partnership						
	_	□ An officer, director, or mana	aging executive	of a corporation		•		
		☐ An owner of at least 5% of th			n			
		No. None of the above applies.	Go to Part 12	•				
		Yes. Check all that apply above			ess.			
		ness Name		ribe the nature of the busine		Employer Identif	ication number	
	Addi (Numi	ress ber, Street, City, State and ZIP Code)	Nam	e of accountant or bookkeepe	er	Do not include S	ocial Security n	umber or ITIN.
						Dates business e	existed	
28.	Within	n 2 years before you filed for b utions, creditors, or other parti	eankruptcy, did ies.	you give a financial stateme	nt to an	yone about your bu	ısiness? Include	e all financial
		No						
		Yes. Fill in the details below.	Data	leaved				
	Nam Addi (Numi		Date	Issued				
Par	t 12:	Sign Below						
true ban	and c kruptc	d the answers on this <i>Statemer</i> orrect. I understand that makir y case can result in fines up to §§ 152, 1341, 1519, and 3571.	ng a false state	ment, concealing property, or	obtain '	ing money or prope	y of perjury that erty by fraud in o	the answers are connection with a
/s/	Mary	Romanelli Mary 1	Lomane	lli				
Ma	ry G.	Romanelli e of Debtor 1		Signature of Debtor 2				
Dat	e A	pril 23, 2019		Date				
Did :	10	tach additional pages to <i>Your</i> .	Statement of F	inancial Affairs for Individual	s Filing	for Bankruptcy (Off	ficial Form 107)′	?
Did :		ay or agree to pay someone wh	no is not an att	orney to help you fill out banl	kruptcy	forms?		
-		me of Person Attach the	a Bankruptcy Pe	tition Preparer's Notice, Declara	ation, an	d Signature (Official I	Form 119).	
	ial Form			Financial Affairs for Individuals F				page 6
Softw	are Copy	yright (c) 2019 ClNGroup - www.cincompa	ss.com					

William Profession - 1997					
Fill in th	nis information to identif	y your case:			
Debtor 1	Mary G. Romanel	Middle Name	Last Name	_	
Debtor 2	First Maine	Widdle Hame	Edot Name		
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	MIDDLE DISTRIC	CT OF PENNSYLVANIA, WILKES-BARRE	_	
Case number (if known)	19-bk-01174			☐ Check if	this is an d filing
Official Fo		n for Indi	viduals Filing Under Ch	apter 7	12/15
·	lividual filing under chap re claims secured by you		l out this form if:		
you have least	sed personal property and is form with the court wiever is earlier, unless the	nd the lease has n	ot expired. you file your bankruptcy petition or by the da e time for cause. You must also send copies	ate set for the meeting of o to the creditors and lesso	creditors, rs you list on
	eople are filing together ate the form.	in a joint case, bo	th are equally responsible for supplying corr	ect information. Both debt	tors must sign
Be as complete write y	and accurate as possible our name and case num	e. If more space is ber (if known).	needed, attach a separate sheet to this form	. On the top of any additio	nal pages,
Down Lint V	our Creditors Who Have	Secured Claims			
information b			c: Creditors Who Have Claims Secured by Pro What do you intend to do with the proper secures a debt?	ty that Did you clair	m the property n Schedule C?
Creditor's	Consumer Portfolio S	Sarvicas Inc	☐ Surrender the property.	□ No	
name:	Consumer Fortiono	ei vices, ilic.	☐ Retain the property and redeem it.		
			\square Retain the property and enter into a <i>Reaffi</i>	irmation 📕 Yes	
**	f 2015 Honda Civic		Agreement.		
property securing debt	:		Retain the property and [explain]: Pay according to terms		
For any unexpir	below. Do not list real es	ase that you listed state leases. Unex	in Schedule G: Executory Contracts and Unipired leases are leases that are still in effect; rustee does not assume it. 11 U.S.C. § 365(p)	the lease period has not y	orm 106G), fill in et ended. You
Describe your	unexpired personal prop	erty leases		Will the lease be	assumed?
Lessor's name:	Chris William	s		■ No	
				☐ Yes	
Description of le Property:	eased Lease for resi	dence			
Official Form 108	3	Statement of I	Intention for Individuals Filing Under Chapter	. 7	page 1

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Debi	tor 1	Romanelli, Mary G.		Case number(if known)	19-bk-01174
Part	3: S	ign Below		41/4	.,
prop	erty tha /s/ Ma Mary	ty of perjury, I declare that I have it is subject to an unexpired lease iry Romanelli G. Romanelli ure of Debtor 1	e. ()	X Signature of Debtor 2	ires a debt and any personal
	Date	April 23, 2019		Date	

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

United States Bankruptcy Court Middle District of Pennsylvania, Wilkes-Barre Division

In re	Romanelli, Mary G.		Case No.	19-bk-01174					
11110	Tomanom, mary o.	Debtor(s)	Chapter	7					
	DISCLOSURE OF COMPENSATION								
C	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certife compensation paid to me within one year before the filing of the pet be rendered on behalf of the debtor(s) in contemplation of or in contemplation.	tition in bankruptcy, or	agreed to be paid	d to me, for services rendered or to					
	For legal services, I have agreed to accept		\$	1,500.00					
	Prior to the filing of this statement I have received		\$	300.00					
	Balance Due		\$	1,200.00					
2. T	The source of the compensation paid to me was:								
	■ Debtor □ Other (specify):								
3. Т	The source of compensation to be paid to me is:								
	■ Debtor □ Other (specify):								
4. I	I have not agreed to share the above-disclosed compensation wifirm.	ith any other person un	lless they are men	nbers and associates of my law					
Ī	☐ I have agreed to share the above-disclosed compensation with a copy of the agreement, together with a list of the names of the particle.	person or persons who	o are not member ompensation is at	s or associates of my law firm. A tached.					
5. 1	In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:								
b c	 Analysis of the debtor's financial situation, and rendering advice Preparation and filing of any petition, schedules, statement of af Representation of the debtor at the meeting of creditors and cond. [Other provisions as needed] 	ffairs and plan which m	nay be required;						
6. I	By agreement with the debtor(s), the above-disclosed fee does not i	nclude the following s	ervice:						
		TICATION							
	Countries that the foregoing is a complete statement of any agreement ankruptcy proceeding.	nt or arrangement for p	wment to me for	representation of the debtor(s) in					
Δ	pril 23, 2019	a 2	~ / ~						
	ate	Signature of Attorney (Bresset & Santora,	LTC)						
		606 Church St Honesdale, PA 1843 (570) 287-3660 Fax Name of law firm		66					

Debtor 1	Mary G. Romanelli	
Debtor 2 (Spouse, if filing)		
United States E	Bankruptcy Court for the:	Middle District of Pennsylvania, Wilkes-Barre Division
Case number	19-bk-01174	

			7.5 (1.10)						
Check one box	only	as	directed	in	this	form	and	in F	orm
SHOOK ONG DOK	٠,		والمناول المالية				-	11000	
122A-1Supp:								11	

- 1. There is no presumption of abuse
- □ 2. The calculation to determine if a presumption of abuse applies will be made under Chapter 7 Means Test Calculation (Official Form 122A-2).
- ☐ 3. The Means Test does not apply now because of qualified military service but it could apply later.
- ☐ Check if this is an amended filing

Official Form 122A - 1

Part 1: Calculate Your Current Monthly Income

Chapter 7 Statement of Your Current Monthly Income

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known). If you believe that you are exempted from a presumption of abuse because you do not have primarily consumer debts or because of qualifying military service, complete and file Statement of Exemption from Presumption of Abuse Under § 707(b)(2) (Official Form 122A-1Supp) with this form.

1.	What is your marital and filing status? Check or	ne only.						
	Not married. Fill out Column A, lines 2-11.							
	☐ Married and your spouse is filing with you. F	ill out both 0	Columns	A and B, lines 2	?-11.			
	☐ Married and your spouse is NOT filing with y							
	☐ Living in the same household and are not	legally sepa	arated. F	ill out both Colu	mns A a	and B, lines 2-	11.	
	☐ Living separately or are legally separated penalty of perjury that you and your spouse a apart for reasons that do not include evading	re legally sep	arated ur	nder nonbankrup	otcy law	that applies or	checking this box, you declar that you and your spouse are	e under living
1 6	iII in the average monthly income that you received fro 01(10A). For example, if you are filing on September 15, th months, add the income for all 6 months and divide the tot wn the same rental property, put the income from that prop	ie 6-month pei tal by 6. Fill in	riod would the result.	be March 1 through Do not include an	gh Augus ny income ng to rep	at 31. If the amou amount more the ort for any line, v	int of your monthly income varied nan once. For example, if both sp write \$0 in the space.	during the
					Columi Debtor		Column B Debtor 2 or non-filing spouse	
2.	Your gross wages, salary, tips, bonuses, overtipayroll deductions).	ime, and cor	nmissio	ns (before all	\$	1,353.18	\$	
	Alimony and maintenance payments. Do not inc Column B is filled in.				\$	0.00	\$	
4,	All amounts from any source which are regular of you or your dependents, including child sup from an unmarried partner, members of your house roommates. Include regular contributions from a s Do not include payments you listed on line 3	port. Include hold, your de	e regular pendents	contributions , parents, and	·. \$	0.00	\$	
5.	Net income from operating a business, profess	ion, or farm						
				otor 1,				
	Gross receipts (before all deductions)	\$ _	0.00					
	Ordinary and necessary operating expenses	-\$ _	0.00	Onnu haus s	Φ	0.00	φ	
	Net monthly income from a business, profession,	or farm \$ _	0.00	Copy here ->	Ф	0.00	\$	
6.	Net income from rental and other real property		Del	otor 1				
		\$	0.00	JUI I				
	Gross receipts (hefore all deductions)	Ψ	0.00					

page 1

0.00

Copy here -> \$

0.00

Ordinary and necessary operating expenses

7. Interest, dividends, and royalties

Net monthly income from rental or other real property

		Column A Debtor 1		Column B Debtor 2 or non-filing sp	oouse	
8.	Unemployment compensation	\$	0.00	\$		
	Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here:					
	Foryou\$					
	For your spouse \$					
	Pension or retirement income. Do not include any amount received that was a benefit under the Social Security Act.	\$	0.00	\$		ſ
10.	Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the total below.	\$	0.00	\$		-
		\$	0.00	\$		
	Total amounts from separate pages, if any.	\$	0.00	\$		
						I
11.	Calculate your total current monthly income. Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B.	1,353.18	+ \$ _		= \$	1,353.18
						current monthly
					incom	e
Part	2: Determine Whether the Means Test Applies to You					
12.	Calculate your current monthly income for the year. Follow these steps:					1
	12a. Copy your total current monthly income from line 11	Сору	line 11 h	ere=>	\$	1,353.18
	Multiply by 12 (the number of months in a year)				X	12
	12b. The result is your annual income for this part of the form			12b.	\$	16,238.16
13	Calculate the median family income that applies to you. Follow these steps:					
	Fill in the state in which you live.					
	Fill in the number of people in your household.					
	Fill in the median family income for your state and size of household.			13.	\$	53,803.00
	To find a list of applicable median income amounts, go online using the link specified form. This list may also be available at the bankruptcy clebs office.	ın tne separatı	e instructi	ons for this		
14	. How do the lines compare?					
	Line 12b is less than or equal to line 13. On the top of page 1, check box Go to Part 3.	∵ √,here is no p	resumptio	on of abuse.		
	14b. Line 12b is more than line 13. On the top of page 1, check box Zi,he pres Go to Part 3 and fill out Form 122A-2.	umption of abo	use is det	ermined by Fo	rm 122A	-2.
Par						
32 HAN	By signing here, I declare under penalty of perjury that the information on this state	ment and in ar	ny attachn	nents is true an	d correc	t.
	X 1s/ Mary Romanelli Mary Romanelle					
	Mary G. Romanelli Signature of Debtor 1					
	Date April 23, 2019 MM / DD / YYYY					
	If you checked line 14a, do NOT fill out or file Form 122A-2.					
	If you checked line 14b, fill out Form 122A-2 and file it with this form.					

Official Form 122A-1